

Name of Person Filing Document: _____
 Your Address: _____
 Your City, State, Zip Code: _____
 Your Telephone Number: _____
 Attorney's Bar Number (if applicable): _____
 Representing ☐ Self or ☐ Attorney for _____

SUPERIOR COURT OF ARIZONA MARICOPA COUNTY

In the Matter of Guardianship of _____

Case Number: JG _____

_____ a Minor

OBJECTION TO PETITION FOR PERMANENT APPOINTMENT OF GUARDIAN OF A MINOR, or ☐ OTHER: _____

The following statements are made under oath or affirmation. I want to tell the Court the following in response to what is written in the Petition:

1. **NAME OF DOCUMENT.** The Petition I object to is called: _____
2. **HEARING DATE.** The date and time of hearing, and the name of the Judge assigned to this matter is:
 Date of Hearing: _____
 Time of Hearing: _____
 Name of Judge or Commissioner: _____
3. **RELATIONSHIP.** My relationship to the person who has/will have the Guardian is:

 _____.
4. **REASONS WHY I OBJECT:** What I want the court to do, and what I want to say about the statements made in the Petition: (use additional sheets of paper, if needed):

5. **MAILING.** I mailed a copy of this Objection (after it was filled out by me) to the following individuals at the following addresses: the Petitioner or his/her attorney, the person who has or will have a Guardian and everyone to whom Petitioner gave a copy of the Notice of Hearing.

Case No. _____

Name: _____
Street Address: _____
City, State, Zip _____

Name: _____
Street Address: _____
City, State, Zip _____

Name: _____
Street Address: _____
City, State, Zip _____

Name: _____
Street Address: _____
City, State, Zip _____

OATH OR AFFIRMATION AND VERIFICATION

I swear or affirm that the information on this document is true and correct under penalty of perjury.

Signature

Date

Sworn to or Affirmed before me this: _____ by _____
(date)

My Commission Expires: _____

Deputy Clerk or Notary Public